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PATENT

MAY 08 2001

40740

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE
TECH CENTER 1600/2900

In re Application of:

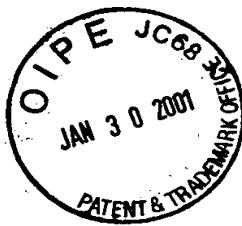
Gabriele MULTHOFF

Serial No.: 09/646,835

Filed: 11 January 2001

For: NEW USE OF HSP70 PROTEIN

Group Art Unit: 1614



REQUEST FOR CORRECTION OF FILING RECEIPT

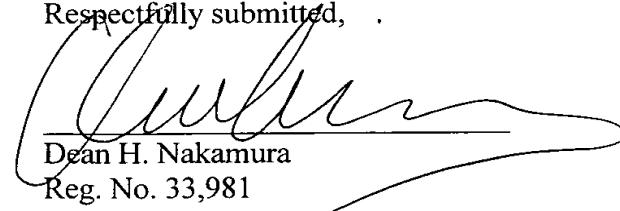
Assistant Commissioner for Patents
Washington, D.C. 20231

Sir:

It is respectfully requested that the filing receipt in the above-identified application be corrected as follows:

1. Under the Applicants, please delete "MUCHEN" and insert --MUNCHEN--.
2. Under the Foreign Applications, please delete "03/27/1999" and insert --03/27/1998--.
3. Under Title, please delete "Application of hsp70 proteins" and insert --New Use of hsp70 Protein-- or --Use of hsp70 Protein--.

Respectfully submitted,


Dean H. Nakamura
Reg. No. 33,981

Roylance, Abrams, Berdo & Goodman, L.L.P.
1300 19th Street, N.W., Suite 600
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(202) 659-9076
Dated: 30 January 2001

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UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS
UNITED STATES PATENT AND TRADEMARK OFFICE
WASHINGTON, D.C. 20231
www.uspto.gov

APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTY.DOCKET.NO	DRAWINGS	TOT CLAIMS	IND CLAIMS
09/646,835	01/11/2001	1614	780	40740	8	30	4

FILING RECEIPT

Roylance Abrams Berdo & Goodman
Suite 600
1300 19th Street NW
Washington, DC 20036



OC00000005708218

Date Mailed: 01/25/2001

Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Customer Service Center. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the PTO processes the reply to the Notice, the PTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

Applicant(s)

Gabriele Multhoff, *Muchen* GERMANY;

MUNCHEN

Continuing Data as Claimed by Applicant

THIS APPLICATION IS A 371 OF PCT/EP99/02165 03/29/1999

Foreign Applications

GERMANY 198 13 760.5 03/27/1999
PCT/EP99/02056 03/26/1999

1998

7/11
File 1074

If Required, Foreign Filing License Granted 01/25/2001

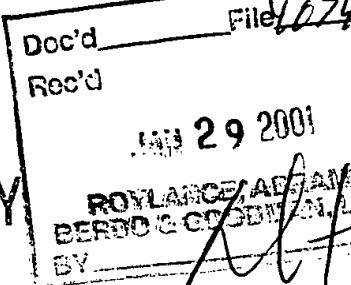
** SMALL ENTITY **

Title

New Use

Application of hsp70 protein

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Preliminary Class

514

Data entry by : TAN, LEA-YUET

Team : OIPE

Date: 01/25/2001





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Bib Data Sheet

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CONFIRMATION NO. 1173

SERIAL NUMBER 09/646,835	FILING DATE 01/11/2001 RULE	CLASS XXX	GROUP ART UNIT 2099 1614	ATTORNEY DOCKET NO. 40740
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APPLICANTS

Gabriele Multhoff, Muenchen, GERMANY;

** CONTINUING DATA *****

THIS APPLICATION IS A 371 OF PCT/EP99/02165 03/29/1999

** FOREIGN APPLICATIONS *****

GERMANY 198 13 760.5 03/27/1999
PCT/EP99/02056 03/26/1999

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AUG 27 2001
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IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **
** 01/25/2001

Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	GERMANY	8	30	4
Verified and Acknowledged	Examiner's Signature _____ Initials _____				

ADDRESS

Roylance Abrams Berdo & Goodman
Suite 600
1300 19th Street NW
Washington ,DC 20036

TITLE

Use of hsp70 proteins

FILING FEE RECEIVED 780	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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